



# **Does Kinship Care Work Well for Children? A Summary of the Research April 2011**

This report was prepared at the request of Mike Scholl, Senior Director of Strategic Consulting at Casey Family Programs, as an informative resource for the Utah Division for Child and Family Services. The request is for a summary of the current research looking at the impact of kinship care on child welfare outcomes, including specific information about placement and educational stability, well-being outcomes, and the maintenance of family and cultural identity for children placed in kinship care. In addition, there was a request for research findings on the general quality of care provided to children by relative caregivers.

An internet and literature review was conducted to gather the most current research findings around the impact of kinship care. This report represents a synthesis of a portion of the research, but a comprehensive literature review of the research is beyond the scope of this report.

## **Introduction to Kinship Care**

Although kinship care has long been used on an informal basis, with over two million children informally living with relatives, an increasing number of children are being placed in kinship care through the child welfare system. Formal kinship care refers to “children placed in the legal custody of the state, and a child welfare agency then places the child with a relative.” Currently, approximately 25 percent of foster children are being cared for by relatives, although some jurisdictions have achieved kinship care rates of 50 percent.<sup>i</sup> This increased reliance on kinship care may be due to a persistent shortage of foster care homes, a shift in federal policy toward treating kin as appropriate and preferred caregivers, and trends in child welfare agencies towards more family centered practice. Forty-one states now give priority to relative placements in their state statutes.<sup>ii</sup>

The research indicates that children in out-of-home care generally benefit when they are placed with kin, specifically with respect to outcomes around safety, placement stability, and maintenance of family connections. However, the findings are mixed when it comes to permanency and well-being outcomes, and there is a lack of longitudinal studies comparing outcomes for children in foster care to those in kinship placements. As a result, we still do not know what differences occur over time for these groups.

It is important to note that children in formal kinship care and non-kin foster care often differ from one another at entry into care. Children in kinship care tend to have fewer emotional and behavior problems at the time of placement than those placed in foster care. One of the limitations of the research is that many of the studies do not control for the differences between those children who enter kinship care and those that enter foster care.

In addition, many state child welfare systems use the term “relative care” and “kinship care” interchangeably, but some may differentiate between the two terms. Generally speaking, relative care includes those family members related by birth or marriage, while kinship care can include fictive kin as well. Fictive kin refers to individuals who are unrelated by birth or marriage, but have such a close emotional relationship with the child or family that they are considered part of the family. For the purpose of this report, relative care and kinship care are used interchangeably and include those related by birth, marriage, and fictive kin as well.

In summary, research indicates that children in the care of the foster care system generally benefit when they are placed with relatives:

- Children in kinship care are less likely to re-enter care than children in foster care.

- Kinship placements tend to be more stable than foster care placements and there are less placement disruptions.
- Children in kinship care remain in care longer, take longer to reunify with birth parents, and are less likely to be adopted than those in foster care.
- Children placed with relatives are more likely to be placed with siblings and maintain relationships with birth parents and relatives.
- Children in kinship care are more likely to remain in their community of origin and maintain connections to cultural identity.
- Children in kinship care are more likely to remain in the same school and benefit from their school support system.
- There is little evidence of differences in mental health outcomes between children in kinship care and foster care.
- Kinship caregivers tend to be older, single, have lower incomes, educational attainment, and have more health issues. They also tend to receive fewer services and trainings than foster parents.

The remainder of the report describes in greater detail the latest findings on the impact of kinship care for children in out-of-home care.

## **Why Place Children with Relatives? Effectiveness of Kinship Care**

**Child Safety:** *Children in kinship care tend to be as safe, or safer, than children in foster care.*

Multiple studies reported that children in kinship care were less likely to re-enter care than children placed in foster care. For example, a study found that children in kinship care are less likely to have had an additional child abuse report by 18 months than those in foster care, 9.7 percent compared to 25.6 percent.<sup>iii</sup> Another study found that, after controlling for placement moves, children in kinship care experienced the same relative risk of substantiated re-reports as children in foster care. In addition, research indicates that children who reunify with their birth parents after kinship care are less likely to re-enter foster care than those who reunify after a foster placement.

**Placement Stability:** *Kinship placements are more stable than foster care placements.*

Studies consistently conclude that children placed with relatives are less likely to have a change in placement or experience multiple placements than those in foster care. A 2010 study<sup>iv</sup> found that children in formal kinship care were much more likely to remain in their relative's home than children in non kin foster care, 47 percent compared to 18 percent. According to another study,<sup>v</sup> when children were removed from their homes and placed with a kinship provider, they were more likely to achieve placement stability than those in traditional foster placements. Fifty- eight percent of children in kinship care were classified as stable at 36 months, compared to 32 percent of children in foster care. Children in foster care were 2.6 times more likely than children in kinship care to experience three or more placement settings.<sup>vi</sup>

In addition, children in kinship care are less likely to report having tried to run away and more likely to report "liking those with whom they live than those in foster group care."<sup>vii</sup> This outcome has significant practice implications, since placement instability is one of the core challenges of formal foster care.

**Permanency: There is more likely to be a delay in permanency for children in kinship care.**

Multiple studies reveal that children in kinship care remain in care longer than those in foster care. Early studies of kinship foster care suggested that children placed with kin were less likely to reunify with their birthparents. Since that time, researchers have generally found that reunification is less likely early on in the placement experience when children are with kin, but the differences in reunification rates between children placed with relatives and those in traditional foster homes are not lasting and even out after several months.<sup>viii</sup> In addition, the rates of adoption for children placed in kinship care are lower than the rates of adoption from foster care. This reluctance to adopt may be because kinship caregivers sometimes reject the prospect of terminating the parental rights of their relatives, and argue that they are already “family” to the child.<sup>ix</sup>

**Family Connections: *Kinship placements preserve family ties.***

Studies have generally concluded that children placed in kinship care are more likely to be placed with siblings, which has been found to provide emotional support and promote resilience among youth.<sup>x</sup> They are also able, to a greater extent than those in foster care, to maintain relationships with their birth parents and other family members, and have a higher likelihood of visitation with biological parents.<sup>xi</sup> In addition, they are more likely to maintain their connections to the cultural milieu and cultural practices that inform their identity.

**Well-Being**

Very few studies of children in kinship care have followed them to adulthood to determine their level of functioning. The short term studies that have been conducted report mixed conclusions about the benefits of kinship care with respect to educational, employment, and mental health outcomes. The long term well-being outcome studies have failed to demonstrate a significant difference between children raised by kinship versus foster parents.<sup>xii</sup>

***Children in kinship care are more likely to live in their community and remain in their schools of origin.***

A few studies in California, NY, and Illinois found that children placed in kinship care are more likely to be placed within their neighborhoods, which reduces changes in schools following out-of-home placement. One research study indicated that 63 percent of children in kinship care reported having to change schools, compared to 80 percent of those children in foster care and 93 percent of those in group care.<sup>xiii</sup>

***There are mixed findings around mental health outcomes and the risk of juvenile delinquency for children in kinship care.***

Data from the Casey Alumni Study found that “placement in kinship care alone did not show significant effects on mental health outcomes when compared to individuals who had no kinship care placements.”<sup>xiv</sup> Another study found little evidence of differences after 18 months in care on development and behavior progress between children in kinship and foster care.<sup>xv</sup> A 2008 study<sup>xvi</sup> on the impact of kinship care on behavioral well-being, however, found that children in kinship care had fewer behavioral problems three years after placement than children who were placed in foster care. It bears repeating, however, that most studies of children placed in kinship

care indicate that they had fewer emotional and behavioral problems at entry into care than children placed in foster care.

In addition, there are mixed findings around youth's involvement in the juvenile justice system if they have been placed in kinship care. A 2008 study in Colorado found that 12.2% of eligible foster children were involved with the Division of Youth Corrections (DYC) as compared with 2.2% of eligible children in kinship care. Thus, children in foster care were 6.3 times more likely than children in kinship care to be involved with the juvenile justice system after the initial out-of-home entry date.<sup>xvii</sup> The results of a 2010 longitudinal study<sup>xviii</sup>, however, indicated that the relative risk of delinquency is significantly greater for African American and white male adolescents served in kin homes. For Hispanic males and Hispanic females, kin homes are associated with a decreased likelihood of delinquency. There is no kin placement effect associated with African American or white females and delinquency.

## **Kinship Caregiver Challenges**

Some studies on kinship caregiver characteristics raise concerns about the safety and well-being of children in kinship care arrangements, given that their caregivers tend to be single, older and have more health problems than foster parents. Kinship care providers also tend to have lower incomes, lower employment rates, and lower educational attainment. In addition to these hardships, relative caregivers are less likely to receive assistance and services from child welfare agencies and receive fewer supportive resources than foster parents. They receive less supervision, training and services for themselves and the children in their care than non kin foster parents. As a result, kinship caregivers may lack the capacity to adequately provide for children and youth with specific challenging needs. The literature on kinship care recommends that all of these factors be taken into consideration when placing a child, particularly a high needs child, into a relative placement and that professional judgment by child welfare practitioners should be used to assess the individual needs of children and the ability of kinship caregivers to attend to these needs.

## **Conclusion**

The findings indicate that kinship care promotes placement stability as well as positive permanency outcomes for children in care and is therefore a viable option for child welfare agencies. More research is needed to assess how kinship care impacts children over the long term, but the short-term findings for kinship care are generally positive: children in kinship care are less likely to re-enter care; have more stable placements; are more likely to be placed with siblings and have contact with birth family members; and have more school stability and cultural connections than foster children. They also, however, are less likely to be reunified or adopted and stay in care longer. While some relative caregivers commit to becoming permanent placements for their children, they often struggle with economic and health challenges, and are often less able to access needed training and supportive services. Given the shift in values towards family centered practice and the growing body of research supporting kinship care, finding better ways to support kinship caregivers could result in even better outcomes for the children in their care.

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- <sup>iv</sup> Webb, Dowd, Harden, Landsverk, and Testa. (2010). *Child Welfare and Well Being*. New York: Oxford University Press.
- <sup>v</sup> Rubin, Downes, O'Reilly, Mekonnen, Luan, and Localio (June 2008). Impact of Kinship Care on Behavioral Well Being. *Pediatrics Adolescent Medicine*. Volume 162, No. 6.
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- <sup>xii</sup> Archives of Pediatrics and Adolescent Medicine. (2008). Impact of Kinship Care on Behavioral Well Being for Children in Out of Home Care. Volume 162, No. 6.
- <sup>xiii</sup> *Time for Reform: Support Relatives in Providing Foster Care and Permanent families for Children*. Pew Charitable Trust. (2007). Retrieved on March 22, 2010 from [http://www.pewtrusts.org/uploadedFiles/wwwpewtrustsorg/Reports/Foster\\_care\\_reform/SupportingRelatives.pdf](http://www.pewtrusts.org/uploadedFiles/wwwpewtrustsorg/Reports/Foster_care_reform/SupportingRelatives.pdf)
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